

Situation Report					
Enhanced Preparedness	Ebola	District and Country	Arua, Uganda		
Name		affected			
Date & Time of report	14 th July 2019	Investigation start date	1 st July 2019		
Prepared by	DHT Arua				

1. HIGHLIGHTS

- Two community deaths under investigation
- No confirmed EVD case in Arua
- Follow up of vaccinated health workers continues
- The District Task Force meeting to be held Monday afternoon.

2. INTRODUCTION

Descriptive epidemiology

Arua District is currently stepping up its response to a possible Ebola spill over following a case that died on 30 June 2019 in Ariwara Health Zone of DRC, that is located 8 kilometres from Uganda border. The confirmed case in Ariwara is known to have used several means of transport while enroute to Ariwara and received treatment from several public and private health facilities on the way and on arrival. The case is known to have had contact with over 200 people including many in the communities bordering Arua District.

The risk of importation of the virus into Arua is very high. Communities from the affected areas share many social services, which includes markets, churches, schools, transportation facilities and the use of health facilities on the Ugandan side by Congolese.

The District mapped a total of 11 Sub counties as high-risk location with 25 health facilities based on population mobility assessment, which include: health facilities frequented by Congolese population, location hosting refugee's proximity to the affected area.

As of 14th July, there are no suspected cases in isolation or contacts being followed up.

1	New suspect cases today	00
2	New deaths	00
3	Cumulative cases	00
	Suspect	02
	Probable	00

Summary of cases



	Confirmed	00
4	Cumulative deaths (suspect, probable & confirmed cases) in	00
	Health Facilities	00
	Community	00
5	Total number of suspected cases on admission	00
	Cumulative cases discharged	00
	Confirmed cases that have died	00
6	Current admissions of Health Care Workers	00
7	Number Health workers discharged today	00
8	Cumulative cases Health workers discharged	00
10	Confirmed cases Health workers that have died	00
11	Cumulative deaths of Health Care Workers	00
12	Runaways from isolation	00
13	Number of contacts listed	00
14	Total contacts that completed 7 days	00
15	Contacts under follow-up	00
16	Total number of contacts of followed up today	00
17	Contacts no longer to be followed because the case tested negative	00
18	Suspect specimens collected and sent to UVRI	00
19	Cumulative specimens collected	02
20	Cumulative cases with lab. confirmation (acute)	00
21	Cumulative cases with lab. confirmation (convalescent)	00
22	Specimens with pending results	00
23	Date of discharge/death of last confirmed case	00

3. PUBLIC HEALTH ACTION / RESPONSE INTERVENTIONS

COORDINATION

- Coordination meeting held today 7:30 a.m and well attended by district staff and partners. The main action points agreed upon include:
 - Presentation of response plan to the District Task Force
 - Presentation of the response plan to the District Executive Committee for approval and to the Chief Administrative Officer for endorsement
 - The DRC team in Bunia is consulting with their Ministry of Health on holding a cross border meeting with Arua district

Next steps

• Submission of the response plan to the NTF on 15 July 2019



SURVEILLANCE AND LABORATORY

- The DRRT responded to an alert at Ozoa cell in Arua Municipality where two children suddenly died after developing fever and abdominal pain
- 612 front line health workers have been provided with on job orientation in 25 out of 30 high risk health facilities
- 73 VHTs were sensitized in Vurra and Logiri sub-counties. Cumulatively, 718 VHTs have been oriented on community case definitions
- 937 travellers were screened on 14 July 2019 at the three points of entry as follows: Vurra 300, Lia 291, Odramachaku 346, airfield had no flights, so no screening was done
- Cumulatively, 9,597 travellers have been screened from 1-14 July 2019 at the four points of entry in Arua district

Next Steps

- Samples from the community deaths to be collected and shipped to UVRI for investigation
- Continue with active case search in health facilities
- Screening continues at all points of entry in Arua district.
- Orient VHTs in Anyavu sub-county in community based surveillance

CASE MANAGEMENT AND IPC

- No suspects in the ETU
- The ETU is ready to admit and manage alerts and confirmed cases.

Next steps

- Finalize the list of health workers willing to help in the ETU. Some of which are expected from Kuluva and DHO's office
- A standby team of volunteers for SDB to be provided by Red Cross for Orientation/Training.
- There will be open day for the community on Tuesday, 16 July 2019
- Prepare for drills for the case management team at Oli ETU to build confidence and enhance skills for the health workers to manage alerts, suspected and confirmed EVD cases.
- The IPC team to support the Regional Referral Hospital, observe and mentor the guards on IPC so that he can ably guide the clients coming into the facility.



RISK COMMUNICATION, COMMUNITY ENGAGEMENT & SOCIAL MOBILISATION

- A total of 5,939 people were sensitized in the Municipality and Ayivuni subcounty in the following Churches: Mvara Cathedral 1060, Christ the King Ediofe 940, Abiriambati Church Oli 1,445, Odramachaku Church 1500.
- Cumulatively, 28,220 people have been sensitized within the municipality and neighbouring sub-counties on EVD prevention and control.
- A total 82 IEC materials were distributed on 14 July 2019, cumulatively 2,827 IEC materials have been distributed

Next steps

- Compile schedules for the government airtime from each Radio station for EVD talk shows.
- Develop a plan to reach the traditional healers through their association in the district.
- Stakeholder mapping analysis for partners in risk communication for harmonization of activities and funds.
- Sensitize communities in Odramachaku on hand washing, as resistance has been observed among both Congolese and nationals.

VACCINATION

• Continue follow up of front line health workers who received vaccination on day 3, 14 and 21.

LOGISTICS

- IPC supplies pledged by CAFOMI
- Mobilized 5 vehicles to support field activities

Next steps

• Follow up on requisition submitted to NTF

4. CHALLENGES/GAPS



- Limited funding to support preparedness and response in Arua district. Most partners are using balances of funds from other programs to support the response. However, this is getting depleted
- Hold a district based partner meeting to mobilize funds for the response in Arua district

5. RECOMMENDATIONS & PRIORITY FOLLOW UP ACTIONS

We acknowledge the support from the following partners

Thematic Area	Partners supporting Arua District Local Government
Coordination	WHO, UNICEF, IDI, UNHCR, Malteser, Plan Uganda, Kuluva
	Hospital,
Surveillance	WHO, IDI, UNHCR, MTI, UVRI/CDC Arua
Laboratory	WHO, CDC Uganda, IDI
Rick Communication	UNICEF, WHO, CHC-Obulamu, URCS, UNHCR
Case Management	WHO, IDI, MSF
Infection Prevention &	WHO, UNICEF, IDI, Malteser
Control/WASH	
Psychosocial Support	URCS, UNICEF
Logistics	WHO, UNICEF, IDI, MSH, WFP, AMREF, World Vision, Malteser,
	UNHCR
Points of Entry	IDI, UNHCR, CAFOMI
Vaccines and Therapeutics	WHO, CDC